

Detail Reference Guide to
Determining CMS Medicare + 35%
for Offices of the Insurance Commissioner (OIC)
Workers' Compensation Maximum Medical Reimbursement Fee Schedules
Effective: July 1, 2012
Subsequent schedules should be updated each July 1 until further notice.

Codes listed with "0" or not listed are carrier/payor priced.
The absence or presence of a code does not indicate workers' compensation coverage.

CLINICAL LAB

Calculate the OIC Maximum Medical Reimbursement with the following formula(s):
(Formula component 1.35 below represents Medicare + 35%)

Medicare *West Virginia Clinical Laboratory Fee*, rounded x 1.35 = OIC Maximum
Medical Reimbursement, rounded

IMPORTANT NOTES:

1. The following table is available from Medicare <http://www.cms.gov/home/medicare.asp>: *Clinical Laboratory Fee Schedule*
2. Within the Medicare website go to the link labeled *Clinical Laboratory Fee Schedule*. From there go to the link *Fee Schedule*. From there download the folder for the July 1 update prior to date of service. For date of service between July 1 and June 30, the reimbursement effective on the July 1 immediately prior to date of service would apply. For example, for a January 10, 2013 date of service, the Medicare reimbursement information effective on July 1, 2012 would apply. Within that folder open the Excel worksheet labeled (year)CLAB.ZIP. For example, the 2012 file is named 12CLAB, then open the Excel worksheet titled: CLAB2012.
3. Take the Medicare fee found under West Virginia (WV) column for the appropriate medical code on the *Clinical Diagnostic Laboratory Fee Schedule* table, rounded and multiply by 1.35 to calculate the OIC Maximum allowable fee, rounded.